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SERIAL NUMBER 10/085,772	FILING OR 371(c) DATE 03/01/2002 RULE	CLASS 455	GROUP ART UNIT 2687	ATTORNEY DOCKET NO. LAA142						
APPLICANTS Ivy Whitsey-Anderson, Hyattsville, MD;										
** CONTINUING DATA *****										
** FOREIGN APPLICATIONS *****										
IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 03/27/2002										
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature Initials		STATE OR COUNTRY MD	SHEETS DRAWING 5	TOTAL CLAIMS 8	INDEPENDENT CLAIMS 1					
ADDRESS Ivy Whitsey-Anderson 1707 Langley Way Hyattsville, MD 20783										
TITLE PORTABLE TELEVISION/CELLULAR PHONE DEVICE										
FILING FEE RECEIVED 370	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: <table border="1"> <tr> <td><input type="checkbox"/> All Fees</td> </tr> <tr> <td><input type="checkbox"/> 1.16 Fees (Filing)</td> </tr> <tr> <td><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)</td> </tr> <tr> <td><input type="checkbox"/> 1.18 Fees (Issue)</td> </tr> <tr> <td><input type="checkbox"/> Other _____</td> </tr> <tr> <td><input type="checkbox"/> Credit</td> </tr> </table>				<input type="checkbox"/> All Fees	<input type="checkbox"/> 1.16 Fees (Filing)	<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)	<input type="checkbox"/> 1.18 Fees (Issue)	<input type="checkbox"/> Other _____	<input type="checkbox"/> Credit
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